

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

ALAMEDA COUNTY TREASURER
1221 OAK ST

OAKLAND, CA 94612

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 15,934,066.43

Gross Claim **\$15,934,066.43**

Net Claim / Payment Amount **\$15,934,066.43**

YTD Amount: **\$15,934,066.43**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

ALPINE COUNTY TREASURER
PO BOX 217

MARKLEEVILLE, CA 96120

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 406,217.90

Gross Claim **\$406,217.90**

Net Claim / Payment Amount **\$406,217.90**

YTD Amount: **\$406,217.90**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

AMADOR COUNTY TREASURER
810 COURT ST

JACKSON, CA 95642

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 731,213.61

Gross Claim **\$731,213.61**

Net Claim / Payment Amount **\$731,213.61**

YTD Amount: **\$731,213.61**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

BERKELEY CITY TREASURER
2081 CENTER STREET

BERKELEY, CA 94704

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,350,091.43

Gross Claim **\$1,350,091.43**

Net Claim / Payment Amount **\$1,350,091.43**

YTD Amount: **\$1,350,091.43**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

BUTTE COUNTY TREASURER
25 COUNTY CENTER DR

OROVILLE, CA 95965

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 2,606,165.17

Gross Claim **\$2,606,165.17**

Net Claim / Payment Amount **\$2,606,165.17**

YTD Amount: **\$2,606,165.17**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS, CA 95249

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 790,648.29

Gross Claim **\$790,648.29**

Net Claim / Payment Amount **\$790,648.29**

YTD Amount: **\$790,648.29**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

COLUSA COUNTY TREASURER
546 JAY ST

COLUSA, CA 95932

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 658,395.54

Gross Claim **\$658,395.54**

Net Claim / Payment Amount **\$658,395.54**

YTD Amount: **\$658,395.54**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

CONTRA COSTA COUNTY TREASURER
625 COURT ST RM 102

MARTINEZ, CA 94553

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 10,121,817.69

Gross Claim **\$10,121,817.69**

Net Claim / Payment Amount **\$10,121,817.69**

YTD Amount: **\$10,121,817.69**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

DEL NORTE COUNTY TREASURER
981 H ST STE 150

CRESCENT CITY, CA 95531

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 693,023.09

Gross Claim **\$693,023.09**

Net Claim / Payment Amount **\$693,023.09**

YTD Amount: **\$693,023.09**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

EL DORADO COUNTY TREASURER
360 FAIR LN

PLACERVILLE, CA 95667

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,811,312.58

Gross Claim **\$1,811,312.58**

Net Claim / Payment Amount **\$1,811,312.58**

YTD Amount: **\$1,811,312.58**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

FRESNO COUNTY TREASURER
PO BOX 1406

SACRAMENTO, CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 10,959,795.49

Gross Claim **\$10,959,795.49**

Net Claim / Payment Amount **\$10,959,795.49**

YTD Amount: **\$10,959,795.49**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS, CA 95988

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 696,768.66

Gross Claim **\$696,768.66**

Net Claim / Payment Amount **\$696,768.66**

YTD Amount: **\$696,768.66**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

HUMBOLDT COUNTY TREASURER

825 FIFTH ST RM 125

EUREKA, CA 95501

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,607,381.92

Gross Claim **\$1,607,381.92**

Net Claim / Payment Amount **\$1,607,381.92**

YTD Amount: **\$1,607,381.92**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

IMPERIAL COUNTY TREASURER
940 WEST MAIN ST

EL CENTRO, CA 92243 2863

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 2,214,426.25

Gross Claim **\$2,214,426.25**

Net Claim / Payment Amount **\$2,214,426.25**

YTD Amount: **\$2,214,426.25**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

INYO COUNTY TREASURER
PO BOX 0

INDEPENDENCE, CA 93526

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 469,950.41

Gross Claim **\$469,950.41**

Net Claim / Payment Amount **\$469,950.41**

YTD Amount: **\$469,950.41**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO, CA 95798 1240

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 9,458,763.57

Gross Claim **\$9,458,763.57**

Net Claim / Payment Amount **\$9,458,763.57**

YTD Amount: **\$9,458,763.57**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

KINGS COUNTY TREASURER
PO BOX 1406

SACRAMENTO, CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,860,788.78

Gross Claim **\$1,860,788.78**

Net Claim / Payment Amount **\$1,860,788.78**

YTD Amount: **\$1,860,788.78**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

LAKE COUNTY TREASURER
255 NORTH FORBES ST RM 215

LAKEPORT, CA 95453

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 921,898.95

Gross Claim **\$921,898.95**

Net Claim / Payment Amount **\$921,898.95**

YTD Amount: **\$921,898.95**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE, CA 96130

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 694,118.70

Gross Claim **\$694,118.70**

Net Claim / Payment Amount **\$694,118.70**

YTD Amount: **\$694,118.70**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

LOS ANGELES COUNTY TREASURER
PO BOX 1859

SACRAMENTO, CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 127,228,731.23

Gross Claim **\$127,228,731.23**

Net Claim / Payment Amount **\$127,228,731.23**

YTD Amount: **\$127,228,731.23**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

MADERA COUNTY TREASURER
C/O BANK OF AMERICA
PO BOX 1859
SACRAMENTO, CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,948,914.23

Gross Claim **\$1,948,914.23**

Net Claim / Payment Amount **\$1,948,914.23**

YTD Amount: **\$1,948,914.23**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

MARIN COUNTY TREASURER
PO BOX 4220
CIVIC CENTER
SAN RAFAEL, CA 94913

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 2,524,844.98

Gross Claim **\$2,524,844.98**

Net Claim / Payment Amount **\$2,524,844.98**

YTD Amount: **\$2,524,844.98**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

MARIPOSA COUNTY TREASURER
PO BOX 36

MARIPOSA, CA 95338

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 473,557.91

Gross Claim **\$473,557.91**

Net Claim / Payment Amount **\$473,557.91**

YTD Amount: **\$473,557.91**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

MENDOCINO COUNTY TREASURER
501 LOW GAP RD 1060

UKIAH, CA 95482

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,121,580.78

Gross Claim **\$1,121,580.78**

Net Claim / Payment Amount **\$1,121,580.78**

YTD Amount: **\$1,121,580.78**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

MERCED COUNTY TREASURER
PO BOX 981311

WEST SACRAMENTO, CA 95798 1311

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 3,279,222.30

Gross Claim **\$3,279,222.30**

Net Claim / Payment Amount **\$3,279,222.30**

YTD Amount: **\$3,279,222.30**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

MODOC COUNTY TREASURER
204 COURT ST RM 101

ALTURAS, CA 96101

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 441,624.85

Gross Claim **\$441,624.85**

Net Claim / Payment Amount **\$441,624.85**

YTD Amount: **\$441,624.85**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

MONO COUNTY TREASURER
PO BOX 495

BRIDGEPORT, CA 93517

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 460,584.27

Gross Claim **\$460,584.27**

Net Claim / Payment Amount **\$460,584.27**

YTD Amount: **\$460,584.27**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

MONTEREY COUNTY TREASURER
PO BOX 1406

SACRAMENTO, CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 5,223,019.22

Gross Claim **\$5,223,019.22**

Net Claim / Payment Amount **\$5,223,019.22**

YTD Amount: **\$5,223,019.22**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

NAPA COUNTY TREASURER

1195 THIRD ST RM 108

NAPA, CA 94559 3035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,500,479.66

Gross Claim **\$1,500,479.66**

Net Claim / Payment Amount **\$1,500,479.66**

YTD Amount: **\$1,500,479.66**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

NEVADA COUNTY TREASURER
PO BOX 128

NEVADA CITY, CA 95959

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,228,113.38

Gross Claim **\$1,228,113.38**

Net Claim / Payment Amount **\$1,228,113.38**

YTD Amount: **\$1,228,113.38**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

ORANGE COUNTY TREASURER
PO BOX 981024

WEST SACRAMENTO, CA 95798 1024

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 36,204,744.70

Gross Claim **\$36,204,744.70**

Net Claim / Payment Amount **\$36,204,744.70**

YTD Amount: **\$36,204,744.70**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

PLACER COUNTY TREASURER

2976 Richardson Dr.

Auburn, CA 95603

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 3,041,024.84

Gross Claim **\$3,041,024.84**

Net Claim / Payment Amount **\$3,041,024.84**

YTD Amount: **\$3,041,024.84**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

PLUMAS COUNTY TREASURER
PO BOX 176

QUINCY, CA 95971

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 637,970.86

Gross Claim **\$637,970.86**

Net Claim / Payment Amount **\$637,970.86**

YTD Amount: **\$637,970.86**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

RIVERSIDE COUNTY TREASURER
C/O UNION BANK OF CA ST GOV
PO BOX 4035
SACRAMENTO, CA 95812 4035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 23,222,032.24

Gross Claim **\$23,222,032.24**

Net Claim / Payment Amount **\$23,222,032.24**

YTD Amount: **\$23,222,032.24**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SACRAMENTO COUNTY TREASURER
PO BOX 980264

WEST SACRAMENTO, CA 95798 0264

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 14,313,207.60

Gross Claim **\$14,313,207.60**

Net Claim / Payment Amount **\$14,313,207.60**

YTD Amount: **\$14,313,207.60**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SAN BENITO COUNTY TREASURER
COURTHOUSE
440 FIFTH ST RM 107
HOLLISTER, CA 95023

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 890,331.09

Gross Claim **\$890,331.09**

Net Claim / Payment Amount **\$890,331.09**

YTD Amount: **\$890,331.09**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SAN BERNARDINO CO TREASURER
PO BOX 1859

SACRAMENTO, CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 23,504,129.86

Gross Claim **\$23,504,129.86**

Net Claim / Payment Amount **\$23,504,129.86**

YTD Amount: **\$23,504,129.86**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SAN DIEGO COUNTY TREASURER
PO BOX 980304

WEST SACRAMENTO, CA 95798 0304

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 36,501,690.98

Gross Claim **\$36,501,690.98**

Net Claim / Payment Amount **\$36,501,690.98**

YTD Amount: **\$36,501,690.98**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO, CA 95814 2920

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 8,269,205.91

Gross Claim **\$8,269,205.91**

Net Claim / Payment Amount **\$8,269,205.91**

YTD Amount: **\$8,269,205.91**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SAN JOAQUIN COUNTY TREASURER
PO BOX 981355

WEST SACRAMENTO, CA 95798 1355

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 7,523,602.39

Gross Claim **\$7,523,602.39**

Net Claim / Payment Amount **\$7,523,602.39**

YTD Amount: **\$7,523,602.39**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SAN LUIS OBISPO COUNTY TREASURER
PO BOX 1149

SAN LUIS OBISPO, CA 93406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 3,034,722.85

Gross Claim **\$3,034,722.85**

Net Claim / Payment Amount **\$3,034,722.85**

YTD Amount: **\$3,034,722.85**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SAN MATEO COUNTY TREASURER
C/O UNION BANK ST GOVT DEPT
PO BOX 4035
Sacramento, CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 7,267,273.90

Gross Claim **\$7,267,273.90**

Net Claim / Payment Amount **\$7,267,273.90**

YTD Amount: **\$7,267,273.90**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SANTA BARBARA COUNTY TREASURER
PO BOX 579

SANTA BARBARA, CA 93102

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 5,172,946.23

Gross Claim **\$5,172,946.23**

Net Claim / Payment Amount **\$5,172,946.23**

YTD Amount: **\$5,172,946.23**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SANTA CLARA CO TREASURER
PO BOX 1406

SACRAMENTO, CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 20,472,056.96

Gross Claim **\$20,472,056.96**

Net Claim / Payment Amount **\$20,472,056.96**

YTD Amount: **\$20,472,056.96**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SANTA CRUZ COUNTY TREASURER
PO BOX 1817

SANTA CRUZ, CA 95061

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 3,287,581.91

Gross Claim **\$3,287,581.91**

Net Claim / Payment Amount **\$3,287,581.91**

YTD Amount: **\$3,287,581.91**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SHASTA COUNTY TREASURER
PO BOX 1859

SACRAMENTO, CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 2,162,117.50

Gross Claim **\$2,162,117.50**

Net Claim / Payment Amount **\$2,162,117.50**

YTD Amount: **\$2,162,117.50**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SIERRA COUNTY TREASURER
PO BOX 376

DOWNIEVILLE, CA 95936 0376

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 414,991.70

Gross Claim **\$414,991.70**

Net Claim / Payment Amount **\$414,991.70**

YTD Amount: **\$414,991.70**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SISKIYOU COUNTY TREASURER
311 FOURTH ST RM 104

YREKA, CA 96097

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 771,368.20

Gross Claim **\$771,368.20**

Net Claim / Payment Amount **\$771,368.20**

YTD Amount: **\$771,368.20**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SOLANO COUNTY T TC
675 TEXAS ST STE 1900

FAIRFIELD, CA 94533 6337

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 4,508,066.09

Gross Claim **\$4,508,066.09**

Net Claim / Payment Amount **\$4,508,066.09**

YTD Amount: **\$4,508,066.09**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SONOMA COUNTY TREASURER
PO BOX 1204

SACRAMENTO, CA 95812 1204

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 5,065,273.48

Gross Claim **\$5,065,273.48**

Net Claim / Payment Amount **\$5,065,273.48**

YTD Amount: **\$5,065,273.48**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

STANISLAUS COUNTY TREASURER
PO BOX 3052

MODESTO, CA 95353 3052

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 5,741,163.17

Gross Claim **\$5,741,163.17**

Net Claim / Payment Amount **\$5,741,163.17**

YTD Amount: **\$5,741,163.17**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

SUTTER COUNTY TREASURER
PO BOX 546

YUBA CITY, CA 95992

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,125,005.68

Gross Claim **\$1,125,005.68**

Net Claim / Payment Amount **\$1,125,005.68**

YTD Amount: **\$1,125,005.68**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

TEHAMA COUNTY TREASURER
PO BOX 1150

RED BLUFF, CA 96080

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 893,617.93

Gross Claim **\$893,617.93**

Net Claim / Payment Amount **\$893,617.93**

YTD Amount: **\$893,617.93**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

TRI CITY MENTAL HEALTH
2008 N GAREY AVENUE

POMONA, CA 91767

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 2,482,908.90

Gross Claim **\$2,482,908.90**

Net Claim / Payment Amount **\$2,482,908.90**

YTD Amount: **\$2,482,908.90**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

TRINITY CO TREASURER
PO BOX 1297

WEAVERVILLE, CA 96093 1297

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 458,847.33

Gross Claim **\$458,847.33**

Net Claim / Payment Amount **\$458,847.33**

YTD Amount: **\$458,847.33**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

TULARE COUNTY TREASURER
COUNTY CIVIC CENTER RM 103E
221 SOUTH MOONEY BL
VISALIA, CA 93291

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 5,435,857.29

Gross Claim **\$5,435,857.29**

Net Claim / Payment Amount **\$5,435,857.29**

YTD Amount: **\$5,435,857.29**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

TUOLUMNE COUNTY TREASURER
2 SOUTH GREEN ST

SONORA, CA 95370

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 853,966.60

Gross Claim **\$853,966.60**

Net Claim / Payment Amount **\$853,966.60**

YTD Amount: **\$853,966.60**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

VENTURA COUNTY TREASURER
C/O WELLS FARGO BANK
PO BOX 980307
WEST SACRAMENTO, CA 95798 0307

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 9,273,061.92

Gross Claim **\$9,273,061.92**

Net Claim / Payment Amount **\$9,273,061.92**

YTD Amount: **\$9,273,061.92**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

YOLO COUNTY TREASURER
PO BOX 1995

WOODLAND, CA 95695

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 To 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 2,420,004.79

Gross Claim **\$2,420,004.79**

Net Claim / Payment Amount **\$2,420,004.79**

YTD Amount: **\$2,420,004.79**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200007A
PAYMENT ISSUE DATE: 08/15/2012

YUBA COUNTY TREASURER

915 8TH ST STE 103

MARYSVILLE, CA 95901 5273

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 06/30/2012 **To** 07/31/2012

Payment Calculations:

Mental health Services apportionment amount for current period 1,004,127.69

Gross Claim **\$1,004,127.69**

Net Claim / Payment Amount **\$1,004,127.69**

YTD Amount: **\$1,004,127.69**

For assistance, please call: John Bodolay at (916) 323-2154